

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	H-S	12 866	3/10 03.19.01
RESPONSE FORMALITY REVIEW	mm	697	5/10/01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral).... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	1	1	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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EST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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